



STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Medical Assistance Administration, P.O. Box 45080, Olympia, Washington 98504-5010

May 15, 2002

TO: MAA Clients, Stakeholders and Partners

FROM: Doug Porter, Assistant Secretary

SUBJECT: MAA TOWN HALL MEETINGS SCHEDULED TO DISCUSS PROPOSED AMENDMENTS TO THE STATE'S MEDICAID AND SCHIP REFORM WAIVER

In May and June, staff from the Department of Social and Health Services' (DSHS) Medical Assistance Administration (MAA) will visit cities around Washington State. The purpose of the visits will be to discuss components of the state's proposed Medicaid and SCHIP Reform Waiver and to ask for public input.

Staff from MAA are currently developing a draft waiver proposal. Before the proposal is finalized, we want your input. Here is a snapshot of the amended waiver as currently envisioned. More details will be available shortly on our web site, <http://maa.dshs.wa.gov/medwaiver/>

Enrollment Freeze: DSHS, after consultation with the Governor and Legislature, would be empowered in specific circumstances to freeze new enrollees in some optional programs. The trigger would be caseloads exceeding budgeted forecasts that otherwise might force the shutdown of entire programs and/or the elimination of entire services, and force current enrollees out of coverage.

Co-payment: We also would require co-payments for all Medicaid clients when clients choose higher cost services in two areas – 1) brand-name drugs with lower-cost equivalents or 2) non-emergency use of hospital emergency rooms. These small co-payments will encourage and direct appropriate use of medical services. Clients would not have to pay a co-payment for the brand-name drug if medically necessary.

Premiums: Optional Medicaid clients above the poverty level would be required to share the cost of their coverage by paying small premiums totaling no more than 5 percent, on average, of a family's income.

Benefits: For some optional adult Medicaid clients, the waiver would provide a benefit package similar to what is offered through the Basic Health plan plus outpatient therapies.

State Children's Health Insurance Program (SCHIP): The waiver would allow Washington to keep about \$30 million a year in SCHIP funds that now must be returned to the federal government. Those funds would be used to pay for new slots in Basic Health for uninsured parents of Medicaid children and childless adults.

These are trying times for everyone at DSHS and all of our partners, but nowhere is the pinch between rising expenditures and shrinking resources more keenly felt than within MAA. Washington State has been a national leader in the ongoing effort to stretch our resources to reach out to vulnerable populations. We were a national frontrunner in the effort to insure children. We have patrolled our costs with a constant eye to making taxpayers' money go further than before. This biennium, we have expanded our cost containment efforts and are working to meet the Legislature's mandate to save \$50 million in medical assistance expenses through additional cost avoidance measures. We are battling on many fronts against the key cost drivers of our era, including the soaring costs of prescription drugs.

But in the final analysis, we still need more tools. We can no longer ignore that our revenue sources are growing at a tiny fraction of our expenditures. Those are real challenges ahead of us, and the solutions are very much in the balance. I welcome your help and your ideas as we move to resolve them.

SCHEDULE OF TOWN HALL MEETINGS FOR MEDICAID AND SCHIP WAIVER:

Dates, times and locations of these meetings are listed below. They are scheduled throughout the state to:

- Give residents, stakeholders, providers, and clients a full opportunity to hear the details of what MAA is considering.
- Hear how MAA is responding to feedback from the public and the federal government.
- Contribute ideas about how those proposals might be changed or enhanced, and;
- See how these changes and others can affect the long-range need to provide health-care to the vulnerable populations that depend on Medicaid.

DATE	TIME	LOCATION
May 21, 2002 Spokane	6:00 p.m. to 9:00 p.m.	Sacred Heart Medical Center Auditorium W. 101 8 th Ave., Spokane, WA 99204
May 22, 2002 Olympia	6:00 p.m. to 9:00 p.m.	Town Square Bldg. 2, First Floor, Training Room 623 8th Ave. S.E., Olympia, WA 98504-5500
May 28, 2002 Tacoma	6:00 p.m. to 9:00 p.m.	South Park Community Center Conference Center (First Floor) 4851 S. Tacoma Way, Tacoma, WA 98409
May 30, 2002 Bellingham	6:00 p.m. to 9:00 p.m.	Garden Street Family Center Conference Room 1231 N. Garden St. #200, Bellingham, WA 98225
June 5, 2002 Pt. Angeles	6:00 p.m. to 9:00 p.m.	Vern Burton Center Council Chamber 321 E. 5 th St., Pt. Angeles, WA 98362
June 6, 2002 Seattle North	6:00 p.m. to 9:00 p.m.	Shoreline Community College Building 1100, Room 1102 16101 Greenwood Ave. N., Seattle, WA 98133-5696
June 11, 2002 Pasco/Kennewick	6:00 p.m. to 9:00 p.m.	Columbia Basin College Workforce Training Center/Bldg. W 2600 N. 20th Ave., Pasco, WA 99301-3379
June 12, 2002 Yakima	6:00 p.m. to 9:00 p.m.	Epic Center 1 st Floor, 701 Superior Ln., Yakima, WA 98902
June 18, 2002 Vancouver	6:00 p.m. to 9:00 p.m.	ESD 112 Klickitat/Skamania Rooms-N. Parking Lot 2500 N.E. 65 th Ave., Vancouver, WA 98661
June 20, 2002 Seattle South/ Des Moines	6:00 p.m. to 9:00 p.m.	Highline Community College Building 7-East Parking Lot 2400 S. 240 th St., Des Moines, WA 98198